

APPENDIX L

**SHIPMENT SUMMARY FOR TRANSPORTATION OF A
DEPARTMENT OF DEFENSE-SPONSORED
PRIVATELY OWNED VEHICLE (POV)**

CUSTOMER INFORMATION

CUSTOMER NAME: _____

CUSTOMER RANK AND BRANCH OF MILITARY SERVICE: _____

Vehicle Information

VEHICLE IDENTIFICATION NUMBER: _____

VEHICLE MAKE/MODEL/YEAR: _____

Required Delivery Date (RDD) Information

ORIGIN/TURN-IN LOCATION: _____

DESTINATION/PICK-UP LOCATION: _____

VEHICLE TURN-IN DATE: _____ REQUIRED DELIVERY DATE:

DATE VEHICLE AVAILABLE FOR PICK-UP: _____

TOTAL NUMBER OF DAYS EXCEEDING THE RDD: _____

(MEASURED FROM RDD UNTIL THE DATE THE POV
IS AVAILABLE FOR PICK-UP AT AUTHORIZED DESTINATION)

Remarks

SIGNATURE OF U.S. GOVERNMENT REPRESENTATIVE,
or U.S. GOVERNMENT CONTRACTOR REPRESENTATIVE: _____

SIGNATURE AND DATE

SIGNATURE OF OWNER OR AGENT: _____

SIGNATURE AND DATE